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CONFIRMATION NO. 8740

<b>SERIAL NUMBER</b> 10/830,060	<b>FILING OR 371(c) DATE</b> 04/23/2004 <b>RULE</b>	<b>CLASS</b> 602	<b>GROUP ART UNIT</b> 3772	<b>ATTORNEY DOCKET NO.</b> 3502-1055
<b>APPLICANTS</b> Ari Pellinen, Heinola, FINLAND; <b>** CONTINUING DATA *****</b> This application is a CIP of PCT/FI02/00832 10/25/2002 <i>CP</i> <b>** FOREIGN APPLICATIONS *****</b> FINLAND U20010398 10/25/2001 <i>CP</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> ** 07/07/2004				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>[Signature]</i> <i>TP</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> FINLAND	<b>SHEETS DRAWING</b> 5	<b>TOTAL CLAIMS</b> 20
				<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> 000466				
<b>TITLE</b> Apparatus and arrangement for exercising and supporting an upper limb				
<b>FILING FEE RECEIVED</b> 450	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	